24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
PURPLE PAC INC	C C00544569
Check if 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee Arlington Edits	Date of Public Distribution/Dissemination
	01 19 / 2016
Mailing Address PO Box 95	Amount
City State Zip Code	251468.00
Alexandria VA 22313	Transaction ID : SE.4175 Date of Disbursement or Obligation
Purpose of Expenditure Television ad placement Category/ Type 004	01 13 / 2016
Name of Federal Candidate Support	Office Sought: House District:
RAND PAUL Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 251468.00	Disbursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Arlington Edits	01 19 2016
Mailing Address PO Box 95	Amount
City State Zip Code	17188.00
Alexandria VA 22313	Transaction ID : SE.4187 Date of Disbursement or Obligation
Purpose of Expenditure Ad production - estimate Category/ Type 004	01 19 / 2016
Name of Federal Candidate Support	Office Sought: House District:
RAND PAUL Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	268656.00
(b) SUBTOTAL of Unitemized Independent Expenditures	. •
(c) TOTAL Independent Expenditures	·
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Heidi Abegg [Electronically Filed] Date	e 01 19 2016
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
PURPLE PAC INC	C C00544569
	0 333341033
Check if X 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee Arlington Edits	Date of Public Distribution/Dissemination
	01 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 95	Amount
City State Zip Code	272.00
Alexandria VA 22313	Transaction ID : SE.4189 Date of Disbursement or Obligation
Purpose of Expenditure Estimate of postage Category/ Type 004	01 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	ce Sought: House District:
RAND PAUL Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disl 268928.00	bursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Arlington Edits	01 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 95	Amount
City State Zip Code	925.00
Alexandria VA 22313	Transaction ID : SE.4191 Date of Disbursement or Obligation
Purpose of Expenditure Estimate of postage Category/ Type 004	01 19 / 2016
Name of Federal Candidate Support Offi	ice Sought: House District:
RAND PAUL Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Dis 269853.00	bursement For: ☐ Primary ☐ General Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	1197.00
(a) CODITO IN E OF ROMESON Experiences	1101.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	269853.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Heidi Abegg [Electronically Filed] Date	01 19 2016
Signature	